Frank Smart Intake Information

EXHIBIT "A"







Today's Date: 1/4/2015



DOC#: 51831

BOOKING#: 2015-00102

COMMIT DATE: 1/4/2015 9:37:51AM

NAME AT BOOKING: SMART, FRANK JEROME

SID#: 22223461

FBI#:

INS#:

Date of Birth: 08/05/1975

Age at Booking: 39

Current Age: 39 **SS#**: 204-54-3598

Race: B Sex: M Marital Status: S

Religion:

US Citizen: Y

Place (State) of Birth: PA

Country of Birth: UNITED STATES (USA)

Admission Type: NEW ARREST County Code: ALLEGHENY (02)

Committed By: AC DISTRICT JUSTICE Transported By: CITY OF PITTSBURGH Arrested By: CITY OF PITTSBURGH ACJ Officer ID#: C.O. PIERCE, C. L.

Shift: 1

CHARACTERISTICS

Height: 509 Hair Color: BLK Weight: 245

Eye Color: BRO

Complexion:

Build: MEDIUM

Glasses: N

Facial Hair: FULL B

Scars/Marks/Tattoos:

BOTH ARMS TATTOO R ARM Highest Grade Completed:

Graduate of: HIGH SCHOOL

Graduation Date:

Allas(es):

SSN:

DOB:

Enemies:

Alert(s):

LLB

LOW LEVEL BUNK

01/27/2012

CONTACT INFORMATION

inmate's Legal Address

475 GARNER COURT APARTMENT 405

PITTSBURGH, PA 15219

Emergency Contact CHERICE NELSON (412) 292-1413





BOOKING#: 2015-00102

COMMIT DATE: 1/4/2015 9:37:51AM

NAME AT BOOKING: SMART, FRANK JEROME

SID#: 22223461

FBI#:

INS#:

CHARGE INFORMATION

Charge

Offense Date: 01/03/2015

Case Number: CR 85-2015

Offender Tracking#: G 699712-6

Offense#: 184101A1

Offense Description: FORGERY **Hearing Date:**

Disposition: AWAITING PRELIMINARY

Sentence Date:

Minimum Date:

Maximum Date:

Effective Date:

Grade: F

Discharge Date:

Bond Amount: 30,000.00

Judge: 05-0-03 PGH MAGISTRATE COURT

Degree: 2

Notes:

Charge

Offense Date: 01/03/2015

Case Number: CR 85-2015

Offender Tracking#: G 699712-6

Offense#: 183922A1

Hearing Date:

Offense Description: THEFT BY DECEPTION Disposition: AWAITING PRELIMINARY

Grade: M Degree: 2 Sentence Date:

Minimum Date:

Maximum Date:

Effective Date:

Discharge Date:

Bond Amount: 30,000.00

Judge: 05-0-03 PGH MAGISTRATE COURT

Notes:

Charge

Offense Date: 01/03/2015

Case Number: CR 85-2015

Offender Tracking#: G 699712-6

Offense#: 183922A3

Offense Description: CRIMINAL CONSPIRACY

Degree: 2 Grade: M

Hearing Date:

Disposition: AWAITING PRELIMINARY

Sentence Date:

Minimum Date:

Maximum Date: **Bond Amount: 30,000.00**

Effective Date:

Discharge Date:

Judge: 05-0-03 PGH MAGISTRATE COURT

Notes:

Charge

Offense Date: 01/03/2015

Case Number: CR 85-2015

Offender Tracking#: G 699712-6

Offense#: 35780-113A31

Offense Description: PROHIBITED ACTS **Hearing Date:**

Disposition: AWAITING PRELIMINARY

Grade: M Degree:

Maximum Date:

Sentence Date:

Minimum Date: Discharge Date:

Bond Amount: 30,000.00

Effective Date: Judge: 05-0-03 PGH MAGISTRATE COURT

Notes:

Case 2:15-cv-00953-DSC Document 48-2 Filed 01/13/17 Page 4 of 41



DOC#: 51831

BOOKING#: 2015-00102

COMMIT DATE: 1/4/2015 9:37:51AM

NAME AT BOOKING: SMART, FRANK JEROME

SID#: 22223461

FBI#:

INS#:

Charge

Offense Date: 01/04/2015

Case Number: FD 99-03131

Offender Tracking#:

Offense#: FD0001

Offense Description: DIRECT CRIMINAL CONTEMPT **Disposition: AWAITING CONTEMPT**

Grade: M Degree:

Hearing Date:

Maximum Date:

Sentence Date:

Minimum Date:

Effective Date:

Discharge Date:

Bond Amount: 1,000.00

Judge: BICKET, ALEXANDER

Notes:

Charge

Offender Tracking#:

Offense#: FD0001

Hearing Date:

Offense Description: DIRECT CRIMINAL CONTEMPT **Disposition:** AWAITING CONTEMPT

Grade: M Degree:

Minimum Date:

Maximum Date:

Sentence Date: **Effective Date:**

Discharge Date:

Bond Amount: 1,000.00

Judge: BICKET, ALEXANDER

Notes:

DETAINER INFORMATION

Detainer

Notes:

Docket #: CC 20110182

Charges: VIO PROB/PAROLE

OTN: G 514762-3

Det Type: COUNTY PROB/PAROLE VIOLATION

Date Lodged: 1/4/15 9:48 am

Judge: JUDGE TODD

Frank Smart Medical Intake

EXHIBIT "B"

C@RIZON"
Promote a culture of safety

				N	l
		RIZON		X DG ACC	515
	F	romote a culture of safety		DECE	-11.5
	Intake	and Receiving Screening		1.	5,
Last Name: , m	KUE First		MI;	ID: 5 18	33/
Date: 4 15 Time:		Male C Female DOB: 8-1	5-7C Alias:		
Most recent incarceration	n: C None When: 9/201	Where: HC 55 Intak	e refused:	Interpreter used:	C Yes C No
	cerated here: C No S Yes When:	9/2014	es (No	Name:	
	C Yes: Records received: C Yes C	Marian Ma		Service:	
	ne Ves (Name): 1 DMC I	FOR YOUR			
rivate insurance. 1, 100		CRITICAL OBSERVATION			
Urgent/Emergent Medica		Urgent/Emergent Mental Health	Referral	Communicable Dis	eases Suspected:
None identified	Yes, check all that apply	No (Yes, check all that apply	/	MRSA	Yes XNo
Severe Injury Life	threatening illness	Active hallucinations Activ	e delusions	Varicella (Chicken po:	5.1
Uncontrolled bleeding		Actively suicidal		Herpes Zoster (shing)	_ 0.2
Head trauma with men	ntal status changes	Other:		Lice/Pediculosis	C Yes No
Other:				Jaundice	C Yes No
Responsiveness (Choose	one):	Oriented to Person & Place	Yes (No	Needle Marks	Yes Xuo
Alert	Verbal Stimulus	Describe:			
F Palnful C	Unresponsive (Call 911) Describe Unres	ponsiveness:		Other:	
Mobility Restrictions/Imp	pairments (No (Yes (Check a	II that apply):			
Deformity C			Brace	Blind) Deaf
Amputation F S	plint Quadriplegic Ci	utches/Cane Other:	Coi	mments:	
	VITAL S	IGNS One or more vital signs refi			
Height We	light Temperature Po	Ilse CACP Respirations		od Pressure heck If, Indicated	Pulse Ox (optional)
519	250 98.2	59 Initial 14	Initial 16	SIO Initial	97/ Vimitlal
C Act C Rptd	Act C Rptd C Not taken	*Recheck	*Recheck	*Recheck	*Recheck
Act I Aped	Act . Mad Not taken	HISTORY			
Major surgery or medical	hospitalization within past year:	Yo C Yes, check all that apply	and include	e date	
Brain surgery	Heart Surgery	Abdominal Surgery		Гм	
Stroke	Transplant	Due to tramatic injury		Other:	
Female history: Date of la	ast LMP: C Unknown	N/A Are you currently pr			
	S (No (Scheduled Refused	Test result: (* Positive	☼ Negative	Fingerstick resu	lt (If pregnant)
Hysterectomy	Menopause				
	MEDICATION REPORTED (None	Unknown See below See	attached form	Verification Th	prough
Name/Dose	Frequency/Last Taken	Prescribed by or Provided by:	C Medication		Clinic
7egreto1	Freq: (311)	10 OURILLE CASTO	I		' VA
300mg	Last: 1-3-15	-	Pharmac	_	Unable to verify
5	I SIA JUZ				Clinic
Dialantin	Freq: daily	- NO			VA
	Last: (3-16)	- color	(Pharmac		Unable to verify
	F	TON AVIOR	Medication		Clinic
	Freq:	-1/10, On 10			VA
	Last:	- 1 NOV NO	Pharmac	_	Unable to verify
		// 1/			Clinic
	Freq:	-		on contract	VA
	Last:		Pharmacy	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Unable to verify
			(Medicatio		Clinic
	Freq:	-		WII COING III .	VA
	Last:	-	C Pharmacy	y y	Unable to verify
			2 Luginisc)	у	

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Last Name: S	mera	First: Frank	1K	MI:	ID: 5 8 3
Allerg	ies: Do you have any all	ergles (food, medication, enviro		See attached	, SOB, anaphylaxis, shock)
Allergy	Reaction Type (Hives,	rash, SOB, anaphylaxis, shock)	Allergy Reac	tion Type (Hives, 1836	, 300, 4
	1	SUBS	TANCE ABUSE		
Alcohol Use:	Do you drink alcohol	1	Substance/Drug Use/Rx Do you use injectable drugs?	Do you use drugs:	Yes No injectable use:
Type:		ast use:	How ofte		Last use?
How much:		w often:			Hx of withdrawal
Excessive drinke			Heroin		Hx of withdrawal
		eizures or DTs associated with	Narcotics		Hx of withdrawal
stopping alcohol	I: (Yes (CIWA)	No	Benzodiazepines Methamphetamines	Cocaine C	Other:
If yes, when:) Weather	
12. 196 V			NICABLE DISEASES	falloudpat	
HIV/AIDS Do You	u have HIV infection or All	OS: C Yes No Weight los	oms Do you have any of the	TOHOWING.	Fever C Yes C No
Are you currentl	ly taking medications:	C Yes C No Weight los	s (Yes (No Nightsv	Coughing blood	Vos C No
TB Skin Test P	rior + PPD: 🦵 Yes 🥬	No Appetite lo	oss Cyes CNo	Cougning blood	Vas CNO None
Plant PPD now:	Yes (No		cough 2+ weeks C Yes C	No Weak/tired	162 (140 4 40
Location of PPD:	: O LFA C RFA	Date Planted: 1 - 4 - 1		Itials	
		MEDI	CAL PROBLEMS	\mathcal{L}	sourcest thealth Saction
Do you have any	ongoing medical problem	ns we should know about?	es, complete applicable secti	ons (No, proceed	To Benavioral Realth Section
Asthma		Cardiovascular - Ask each	question		
How long:		Angina C Yes C	No Atrial fibrillation	C Yes C No	Last CVA:
Last asthma atta	nck!		No Pacemaker	C Yes C No	Last TiA:
Last astituta atte	JCK1	Heart attack C Yes C	No Internal defibrillation	C Yes C No	Comments:
ED tolk in least 00	days C Yes C No	Bypass surgery C Yes C		C Yes C No	
	days (Yes C NO	CHF CYes C	No Blood clot in lungs or le	egs C Yes C No	
If yes, when:	6 6	Are you taking Warfarin, Coum	adin or lantoven (Yes	s C No	
	last year (Yes No		Last episode:		
If yes, when:		Date of onset:	Edge dysod and		
	nad a tube put down you				
	nachine breathes for you:		Titiale	Not done Reas	on:
C No C Yes	, when:	How long:	Fingerstick:	If finger stick >300.	ask the following:
Currently on ste	eroids: (* Yes (* No	Are you currently taking medic	ation(s): Yes No	Mauson:	Ye CNO
Peak flow: 🦵 Y	'es (No ()	Are you currently taking insuli	I: (YES I NO	I vausca.	Yes (No
Reason not take	en:	When was last hospitalization:		Excessive thirst: (
•				Urine ketones (If taken	A
				Not taken Reason	on:
Hypertensic	on		Epilepsy/Selzure		~14
How long:			Last selzure:	tober of	21 1
	ly taking medication(s):	C Yes C No	More than one seizure a		
0.000.000	anti-hypertensives:	C Yes C No	Two or more anticonvul	lsants: XYes	(No
Gastrointes					
Gastrointes	undi	C No Frequency:	Last:	Comments:	
		C Yes C No Frequency:		Com	ments:
	lack stools from bleeding:	i tos i No riedoency.			
Comments:					

Last Name:	mart	Fir		1: TID: 5/83
Cancer			MEDICAL PROBLEMS (continued)	
1	. C	s C No	Dialysis	COPD / Emphysema
Do you currently	-		Type: C Hemodialysis C Peritor	eal O₂ dependent: C Yes C No
1	y being treated for cancer!	C Yes C No	Number of times per week:	Peak flow:
Туре:			Last dialyzed:	□ Not taken
L HCA C	Yes No		Cother:	
	Do you have any o		BEHAVIORAL HEALTH th complaints? No Yes	
	Do you have a hist	orv of a mental heat	th complaints? X No 1 Yes ealth problem? Yes - Complete Section	No - Proceed to Section 2
Section 1 Have yo	ou ever been diagnosed wi	th a mental Iliness	: No Tyes, check which illness:	Schizophrenia Major Depress
History of outpati	lent therapy: C No C Ye	S Within the las	tyear: Yes No Bipolar	T Other:
History of psychol				No Within the last year: C Yes C
	things: Tyes C No		History of seeing things:	
	of suicide attempt(s):	No C Yes last		ou thinking of suicide now: C Yes
	tory of suicide: Yes		Recent significant loss: C Y	ou thinking of suicide now: 1 Tes
		*		
Are you thinking o	f hurting yourself now:	Yes No No		u ever hurt yourself on purpose: Yes
	pitalized for head trauma:		Are you thinking of hurting other	
listory of sex offer	neae: C Yes X No. Ul	tom of Esna	History of violent behavior: 1 Yes	No History of victimization: Yes X mental disability Mental retardation
, or one	ioca i ica y ivo mis	tory or 1 spec	EXAMINATION Develop	mental disability Mental retardation
oneral Appearan	ca: X NAD F Appears	hydrated	Other:	
ral Screening	1	Describe	Şkip (visible)	Describe
	Missing teeth	Describe	Unremarkable Surgical sca	Describe Describe
Absœsses	Cavities		Open Rash	F Pallor
Lesions	Dentures	-	Sores Tracks	Lacerations
Swelling	Contures/Partials		Tattoos Cother:	Lacerations
Other:			Tattobs / Other:	
			7,700,000	
içement		nec	DISPOSITION	
GP	I Isolation reason:	Referral H&P	Commission Co. March	Behavioral Health (Routine (Expedite
Infirmary	Cobservation	Nursing Sid		
Suldde Watch		Practitione		hronic Care Clinic C Routine C Expedite
	Immediate supervisor		- Appendix 1	Dental referral C Routine C Expedite
	nt signed: Yes C No		On Call F ER for transport	
ess to care review	1.7			
evance process ex				
lement (check all				minority of the control of the contr
rement (cueck all	that apply): I CIWA-		BWS-C	
			DDITIONAL COMMENTS	
nformation is cor	rect and I accept the prov	Islon of medical.	lental and mental health care.	\mathcal{L}
1	111	α	1 0 1 11	
-fred	ration 'extensione	Tue-	Ann Green W ROW	na le
	THE PARTY OF THE P		mundower's Hame (Printed)	njorvetred stagnature Date
indary review				100 - 100 -
indicated) —				
	Name (Prin	2)	Signatura	Date



950 2nd ave, Pittsburgh, Pa 15219 412-350-2214 or 2277

To: Classification Via fax: 412-350-2240 From: Corizon Subject: Housing Status per Medical Order DOC#: 5/83/ Medical Order for Special Housing Status: Lower Level Low Level Low Bunk _ Cell for Handicepped Single Cell Medical Bod rest Single celled or housed with another inmate on same status per medicalmast romain in cell) Other Physician Practitioner:

Excerpts from Rae Ann Green Deposition

EXHIBIT "C"

1	if you know?
2	A The MA.
3	Q The MA?
4	A The medical assistant.
5	Q Oh, MA, okay. So tell me in terms of
6	when you come into work and you are working in
7	intake, is that on the ground floor?
8	A Yes.
9	Q Okay. And do you stay in that area
10	for the entire time of your shift
11	A Other than lunch, yes.
12	Q so to speak. And is there an area
13	with cells for the inmates?
14	A There are cells, yes.
15	Q There are like holding cells?
16	A Yes.
17	Q And then they could be roaming about
18	and that's when you give them their medication?
19	A Yes.
20	Q So when you do, take me through the
21	process from the time that an inmate is brought to
22	the jail in intake, what happens?
23	MS. KENYON: I just want to caution
24	the witness, only if you know.
25	A Yeah, I only know part of it.

1	Q I'm only asking you to tell me what
2	you know here today.
3	A When they come in with the police
4	officer, an RN assesses them at the door to make
5	sure that they are okay medically to be in the
6	facility. If they are not, they are sent back
7	out.
8	Q And that's prior to their arraignment;
9	right?
10	A Yes.
11	Q Is that something that you were
12	involved in at any time?
13	A I have done it, yes.
14	Q Okay. Did you are you the one who
15	assessed Mr. Smart at that time frame?
16	A I don't know.
17	Q Okay. All right. Okay. So that's
18	what happens, and then tell me what happens after
19	that.
20	A Then they take the inmate into a
21	holding cell, and I don't know what happens, I
22	believe they go in front of the judge, and at some
23	point they end up on the intake side, which is an
24	open area with some cells and TV's and vending
25	machines and stuff.

1	Q He indicated to you that they were
2	prescribed by Mercy?
3	A Yes.
4	Q Okay. All right. And let's go to the
5	next page. Down below it says you have checked
6	the condition of epilepsy or seizure, is that
7	something that Mr. Smart reported to you?
8	A Yes.
9	Q And he indicated that he last had a
10	seizure in October of 2014?
11	A Yes.
12	Q Okay. And the next page, under
13	"Disposition," you checked "placement GP," is that
14	general population?
15	A Yes.
16	Q And then "referral H and P," what does
17	that mean?
18	A History and physical; all inmates get
19	one.
20	Q Okay. And then what is the "Chronic
21	Care Clinic" that is checked?
22	A Because he had a chronic condition of
23	seizure disorder, I referred him to follow-up with
24	the physician at the chronic care to manage it.
25	Q How do would that happen?

1	A We fill out a, what's called a
2	priority list, and we write down their name and
3	condition and what you are referring to. I would
4	have written "chronic care seizure disorder," and
5	then it gets turned in at the end of each shift.
6	Q And then when would he have or should
7	have seen a physician at the chronic care clinic?
8	A I don't know.
9	Q You don't know what the time frame is?
10	A No.
11	Q Do you know if he ever met with a
12	physician at the chronic care clinic?
13	A I don't believe so. He wasn't there
14	long enough.
15	Q What's the purpose of him meeting with
16	a physician at the chronic care clinic?
17	A They would probably, one of the things
18	was his medication was unable to be verified, and
19	the record that I had was a past record, so I was
20	going on his word and what I saw when I got his
21	medications ordered. So he would have needed to
22	have met with the physician so that they can go
23	over his history, go over when his last seizure
24	was, how he was treated, those types of things.
25	Q What do you mean his medication was

1	unable to be verified?
2	A When an inmate tells us that they are
3	on medication, everything has to be verified,
4	whether you call the pharmacy, the physician
5	directly, whoever dispensed the medication, and he
6	disclosed that he got his medications from Mercy,
7	who wasn't open that day.
8	Q So you couldn't verify the medication
9	because this was the weekend?
10	A Right.
11	Q And they were not open?
12	A Right.
13	Q So I'm assuming that at intake on the
14	weekends this happens a lot where you can't verify
15	the medications, that they are closed; correct?
16	MS. KENYON: Object to form, go ahead.
17	A No, because a lot of people don't use
18	these smaller clinics. They use Giant Eagle,
19	Rite Aid, things like that, and I can call and
20	verify.
21	Q What's the next step if you can't over
22	the weekend verify medication through the
23	pharmacy?
24	A I go into his past record and look and
25	see the last time he was there and what

Allegheny County Police Initial Report

EXHIBIT "D"

INITIAL REPORT

CCR#:

00090-15

CASE#:

H-007-15

DETECTIVES

TODD DOLFI

THOMAS FOLEY

CASE

DEATH INVESTIGATION- UNDETERMINED

VICTIM

FRANK SMART B/M/39

ACJ INMATE

LOCATION

ALLEGHENY COUNTY JAIL-POD 4A-CELL 121

DATE AND TIME

OF OCCURRENCE:

JANUARY 4, 2015

2254 HOURS

WEATHER

30 DEGREES- LIGHT SNOW- INDOOR SCENE

SUMMARY

On January 5, 2015 at approximately 0040 hours Captain Bytner of the Allegheny County Bureau of Corrections requested the investigative assistance of the Allegheny County Police Homicide Unit in reference to a death investigation.

On January 3, 2015 at approximately 2100 hours Frank Smart was arrested by the City of Pittsburgh Police Department (OTN G699712-6). Smart was transported to the ACJ and was accepted into intake at approximately 2209 hours. Smart stayed in intake until he was assigned to POD 4A on January 4, 2015 at approximately 2023 hours. At that time, Smart was lodged on POD 4A cell# 121.

On January 4, 2015 at approximately 2254 hours CO Fleisner who was assigned to POD 4A was making his required rounds on the POD when he heard what he described as a very loud and abnormal "Snoring" sound coming from inside of cell # 121. CO Fleisner then called on inmate Edwin Williams who is the "Suicide Worker" on the POD.





CCR# 00090-15 CASE# H-007-15

Williams came to cell #121 and Fleisner looked inside and noticed that Smart had blood coming from the corners of his mouth and was spitting saliva. Williams also said that he observed Smart hit his head on the steps to the bunk beds and then roll of the bed onto the floor striking his head again. CO Fleisner then called for a "Medical" on POD 4A.

Captain Bytner and several other CO's arrived to assist with care along with 4 nurses who were already on scene and assigned to the jail medical division. Captain Bytner stated that Smart was not fighting them, however, he was resisting care and was flailing his arms and legs. CO's restrained Smart with handcuffs and shackles after they received permission from the nurses.

It was Detectives understanding that the nurses administered two 2mg doses of Ativan in the process of care for Smart. At approximately 2325 hours 911 was called to respond to the jail. While awaiting the arrival of paramedics Smart stopped breathing. Nurses and CO's began CPR and attached an AED. CPR was conducted until the arrival of Pittsburgh EMS Medic 7 who then took over care. Smart was transported to Mercy Hospital where he was pronounced dead at 0022 hours by Dr. Tracy Moore.

Captain Bynter secured the cell/scene and kept it locked until the arrival of Detectives. Scientist Stanich of the Allegheny County Medical Examiner's Office along with Detectives Dolfi and Foley processed the scene.

POD 4A is considered a classification POD. Meaning, the inmate will stay on that POD until they are "Classified" and placed on a certain level pertaining to jail guidelines of their classification or they are released from custody. Smart, had just arrived on the POD and had not been classified yet.

On January 5, 2014 a post mortem examination was conducting on Frank Smart by Dr. Arboe and Dr. Luckasevic. Dr. Arboe stated that the results of the examination will be pending Histology and Neurology reports.

The following CO's and Jail Staff completed written reports as to their involvement in this incident. All reports have been turned over to the Allegheny County Police and are located in the file:

Captain Bytner
Captain Kengerski
Sgt. Michael Brown
CO Fleisner
CO Robert Dixon
CO John Mangis
CO Norman Martin

CO Jason Brown

INITIAL REPORT PAGE-3

CCR# 00090-15 CASE# H-007-15

CO Michael Istik

CO Ryan Gorham

CO Holland

CO David Foriska

RN Logan Berger

RN Susan Leri

117

RN Darlene Wichryk

RN Alisia Hollingsworth

SUPPLEMENTAL REPORT

CCR#:

00090-15

CASE#:

H-007-15

DATE:

1/5/15

TIME:

0145 HOURS

DETECTIVES: THOMAS FOLEY & TODD DOLFI

CASE:

DEATH INVESTIGATION UNDETERMINED ACJ

VICTIM:

FRANK SMART B/M/39

IN REF TO:

INTERVIEW OF CAPTIAN ROBERT BYTNER ACJ SHIFT

COMMANDER (412)350-2002

SUMMARY:

We spoke with Allegheny County Corrections Captain Bytner the ACJ Shift Commander who met with Detective Dolfi and I on Pod 4A. He indicated that the incident occurred in cell 121 on the Pod and has been secured since the incident. He said that he responded to POD 4A approximately 2254 hours to assist with a medical emergency. Captain Bytner said that he replaced CO Bytner with CO Holland who was currently on watch. See interview of CO Holland.

Captain Bytner said that he arrived on the Pod a short time later and he observed the inmate lying on the floor. He said he ordered CO Fleisner to open the door. Captain Bytner said that he got in, the victim was lying on the cell floor snoring. The captain said that he took 2 pictures of the victim where he was lying on the ground when he first saw him (Captain Bytner took 4 photographs of the victim; 2 while in his cell and 2 as he was being transported by Medics.). Captain Bytner published the pictures to us and they will be made part of the file. Captain Bytner explained that he learned that CO Fleisner heard inmate Frank Smart making loud snoring noises when he made his round. He said that the Pod Trustee Edwin Williams Sr. B/M/49 was up and making rounds. He said that Trustee Williams was assisting the Pod CO and when he looked in; he observed blood coming from the victim's mouth.

Captain Bytner said that he entered the cell with Nurse Logan Berger and began working on the victim. He said that the victim was combative, but he didn't feel he was fighting on purpose. The Captain said that he and several COs restrained the victim so that the ACJ Medical staff could work on him. He said that they could not get vitals on the victim because of his combative state. He said that the Medical staff was able to give the victim an injection but he said that he continued to fight them. The Captain said that they continued to restrain the victim. He said that he ordered the COs to place a spit shield on the victim because of the blood coming from his mouth. The Captain said that CO Fleisner got his hand bit while trying to place the spit shield. The Captain emphasized

12. 1



CCR#: 00090-15 CASE#: H-007-15 DATE: 1/4/15

that he was reminding the crew working on the victim that he (victim) was not fighting maliciously. He said that the crew of Cos and the medical staff understood this. Captain Bytner said that his COs were tiring and injured, so he asked the medical staff if it would be OK to restrain/cuff the victim so that he didn't hurt himself of any additional staff. He said that Nurse Logan Berger said it would be OK. The Captain said that he ordered that the victim be handcuffed; he explained that two sets of cuffs were used to cuff the victim and he was also shackled. He said that this allowed the medical staff to give a second injection. The Captain said very shortly after this CO Gorham alerted them that the victim had just gone motionless. He said that the medical staff checked his vitals and they told him that they were going to begin CPR. Captain Bytner said that he uncuffed the victim and rolled him back over. He said that additional medical help was arriving. He said that they utilized the defibrillator but did not believe that they shocked him.

Captain Bytner wrote a statement/report as is their internal protocol. This statement and the other employees involved reports will be made part of this record.

END OF THIS REPORT tgf

122



CCR : 00090-15 CASE: H-007-15 DATE: 4/1/2015 **TIME: 2340HRS**

DETECTIVE: TODD DOLFI & THOMAS FOLEY

CASE

: DEATH INVESTIGATION- UNDETERMINED

VICTIM

: FRANK SMART B/M/39

IN REF TO : INTERVIEW OF DARLENE WICHRYK RN

SUMMARY :

On the listed date and time Detectives Dolfi and Foley spoke with RN Darlene Wichryk at the Allegheny County Jail about the incident involving inmate Frank Smart on January 5, 2015.

Wichryk said that she remembered the incident and that she was working the midnight shift that night. She said that she was in the process of shift change and was counting medicine with the staff she was relieving.

Wichryk said that a call for a medical emergency was received and she responded to it. She said RN Berger, RN Leri and RN Hollingsworth responded as well. Wichryk said that RN Berger was in the cell with the inmate and the CO's. Wichryk said that she remembered that the inmate appeared to be seizing and was thrashing around. She said that the CO's attempted to restrain the inmate and RN Berger administered Ativan to the inmate. Staff then wanted to check his blood sugar. She and RN Hollingsworth left the POD to go get the "Glucometer." She said that they brought it back and checked the inmate's blood sugar.

Wichryk said that the inmate became aggressive and began to yell so the inmate was restrained by CO's. She said that RN Berger gave him a second dose of Ativan. Wichryk said that a short time later the inmate became unresponsive and CPR was initiated.

Wichryk said that she was in the inmate's cell for a short period of time and was outside the cell most of the time. She said that RN Berger was in the cell with the inmate and CO's. Wichryk continued that she became more involved when CPR was started and the inmate was taken out of the cell. Wichryk was asked if she saw anything that was inappropriate and seemed like excessive force and said "No." Wichryk said that she did

AC-10196



CCR# 00090-15 CASE# H-007-15

not observe anything that she felt was wrong or excessive. Wichryk was asked if she would have done anything different and she added that she was always taught that when someone is seizing that you just let the person and seize. She stated that she would have just put a blanket under the inmates head and got everybody out of the cell. However, she did add that she did not feel what was done was bad or wrong. The interview was then concluded.

Alisia Hollingsworth Statement

EXHIBIT "E"

INVESTIGATIVE REPORT

DATE

: MARCH 31, 2015

J#

: 056-15

INVESTIGATOR : INSPECTOR WILLIAM J. PALMER

CASE

: INMATE DEATH- FRANK SMART #51831

IN REF TO

: INTERVIEW OF NURSE ALISIA HOLLINGSWORTH

SUMMARY

:

On Saturday, March 28th, 2015, Corizon Attorney Katie Kenyon was interviewing nurses about an investigation into Physician's Assistant David Druski. During the interview of Registered Nurse Alisia J. Hollingsworth, Hollingsworth brought up the death of Inmate Frank Smart. Hollingsworth reported seeing Captain Robert Bytner performing a choke hold on Smart during the medical emergency. Hollingsworth was bothered by Bytner's actions that day, and was now reporting it. Attorney Kenyon notified the Assistant Director of Nursing Leslie Travis. Travis reported this to me and to the warden.

On March 31, 2015 at 10:00 a.m., I had the opportunity to interview Nurse Alisia Hollingsworth. The interview was conducted in the Internal Affairs Office at the jail. As to the Frank Smart medical emergency, Hollingsworth stated the following:

Hollingsworth was working in the Infirmary as an LPN. She was there with Logan Berger the R.N. of the infirmary. Logan was busy with a patient with chest pain at the time of the Smart emergency, so Hollingsworth responded by herself at first. When she arrived, Smart was alive but incoherent. She took his blood pressure, and recognized that Smart was in a postictal state. Because of his state, Smart was flailing around. Hollingsworth believed that Smart had already been put in handcuffs. Hollingsworth knew Smart needed Ativan, but there was none on her cart. Hollingsworth then responded to the infirmary to get the Ativan. When she returned, it was decided the medical team needed a glucometer. Hollingsworth then responded to the Intake area to retrieve a glucometer. When she returned to Smart's cell, Hollingsworth saw Nurse Logan Berger standing in the back corner of the cell. Four or five correctional officers were lying on top of Smart. The officers were lying perpendicularly to Smart's body. Captain (Robert) Bytner was down on his knees holding Frank Smart in a headlock. Hollingsworth described Bytner holding Smart around the neck, which Hollingsworth could see, was choking Smart. The inmate was struggling to breathe. Hollingsworth observed that Captain Bytner was red of face and sweating. Hollingsworth dropped off the glucometer and was told by Nurse Berger to respond back to the infirmary to be prepared to call for permission to give a second dose of Ativan. Hollingsworth did respond back to the infirmary. There, she called Rachel, who was the person to authorize a second shot of Ativan. Rachel did authorize a second dose. Rachel added to call 911 to have this patient sent to an outside hospital. Hollingsworth did call 911. Hollingsworth then

PAGE TWO: INTERVIEW OF NURSE ALISIA HOLLINGSWORTH

J-056-15

received a call from Smart's pod. She believes it was Nurse Sue Leary. The caller was telling Hollingsworth that CPR had been initiated and to notify 911 of such. She did. Hollingsworth then responded back to the medical emergency. When she arrived Logan was doing the chest compressions. The inmate was in the same position as when she last saw him. She did not remember if he was still handcuffed at this time. Logan was getting tired, so Hollingsworth took over chest compressions. When the paramedics arrived Smart was taken from his cell and CPR continued in the pod.

Hollingsworth informed me that seeing Captain Bytner holding the inmate in a chokehold bothered her ever since. When talking to the Corizon lawyer, Hollingsworth felt she needed to say something.

I asking Hollingsworth how long of a time period was she in the cell to see Capt. Bytner have the inmate in a headlock. Hollingsworth said she was in there for about ten seconds. She was there to drop off the glucometer, and then Logan sent her back to the infirmary.

I asked Hollingsworth if Nurse Logan Berger was saying anything to the captain or officers on top of the inmate. Hollingsworth said he was not, describing Logan as just standing in the corner. Hollingsworth also said nothing to the officers.

I asked if she talked about it later with Logan. Hollingsworth said she brought it up at the time, but Logan just said "That's corrections". He also said to just report what she did during the emergency.

Hollingsworth said that the next day, Captain Bytner came up to her and asked if she was okay, and if there was anything she wanted to talk about. Hollingsworth just responded with a "no".

Alisia Hollingsworth stated that she has been in the medical field for 12 to 14 years. She has been a Registered Nurse since November of 2014. Before that she was a LPN for about a year. Prior to the jail, Hollingsworth worked at Allegheny General Hospital.

As to other people in the cell, Hollingsworth did not know the names of the officers on top of the inmate. She knew that Nurse Sue Leary came to the area at some point, but she was not sure when.

When describing the officers on top of the inmate, Hollingsworth said they were putting all of their weight on the inmate, describing the officers lying on him in a way that the officers' feet were off the floor.

Hollingsworth was not familiar with the inmate prior to this medical emergency.

Hollingsworth was asked if she told any supervisor before this weekend. She said she had not.

Alisia Hollingsworth added nothing further at this time. This information will be forwarded to ACPD Homicide.

Excerpts from Logan Berger Deposition

EXHIBIT "F"

```
62
            chair?
1
                    ATTORNEY KILLION:
2
                    Oh, I'm sorry.
3
      BY ATTORNEY KILLION:
4
            Sorry, he was seated on the
5
      Q.
6
      ground?
7
      Α.
            Yes.
            So he's seated on the ground.
8
      What happens when you go into the
9
      cell?
10
            I recommend that we place him
11
      in the recovery position.
12
            And did you, in fact, do that?
13
      0.
            I believe so.
14
      Α.
15
            What is the recovery position?
      Q.
            Laying on the ground, typically
16
      Α.
      on the left side.
17
            And then what happened after
18
      you placed him on the ground? Did
19
     you, in fact, put him on his left
20
21
     side?
      A. I believe so. I can't remember
22
      specifically.
23
            And what happened then?
24
      Q.
            He continued to seize. Vital
25
      Α.
```

```
63
      signs were obtained.
1
            Was anything placed under his
2
      head, or is that a protocol, to place
3
 4
      something under their head?
5
      Α.
            No.
6
                    ATTORNEY KENYON:
                    Another double question.
7
            There's ---.
8
      Α.
      BY ATTORNEY KILLION:
9
            Is that no to ---?
10
      0.
            Yes. No to both questions you
11
      Α.
12
      asked.
        And you are the person who
1.3
      obtained his vitals?
14
        It was myself and the other
15
      Α.
      nurses that were assisting.
16
            Who were the other nurses?
17
      Q.
            Alisia Hollingsworth, Darlene
18
      Wichryk ---. I believe Sue Leary
19
     (phonetic) was present at that point.
2.0
         How did you say Darlene's last
21
22
      name?
            Wichryk.
23
      Α.
24
            Wichryk? So Leary, Wichryk and
      Q.
25
     Hollingsworth?
```

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```
64
1
             I believe so, yes.
      A .
             And yourself?
2
      0.
             Yes.
3
      Α.
                     ATTORNEY DACHILLE:
4
                     And if you don't mind, I
5
6
             know Wichryk is a spelling
             nightmare for Jeremy. It's
7
             W-I-C-H-R-Y-K. Does that sound
8
             right?
9
             Yes.
10
      Α .
                     ATTORNEY KENYON:
11
                     And Alisia's with an S.
12
13
      BRIEF INTERRUPTION
14
      BY ATTORNEY KILLION:
             When Alisia Hollingsworth
15
      Q.
      showed up, did she bring a medical
16
17
      cart?
             Yes.
18
      Α.
             What's typically on a medical
19
      0.
2.0
      cart?
                     ATTORNEY KENYON:
21
                     Just a medical cart or a
22
             CRASH cart, or ---? I don't
23
             know if you wanted to limit it.
24
             Are you referring to the cart
25
      Α ...
```

```
65
      specifically at the jail?
1
      BY ATTORNEY KILLION:
2
            Is there a different cart
3
      0.
      that's used for medical emergencies?
 4
            Yes, there is an emergency
 5
      Α.
 6
      cart.
            Is it called a CRASH cart?
7
      0.
8
      Α.
            No, when you ---.
9
            What's a CRASH cart?
      Q.
10
            A CRASH cart is something in
      Α.
      HCOF-certified facilities.
11
           So what do you want me to call
12
      Q .
      this, an emergency cart?
13
        An emergency cart is
14
      Α.
15
      sufficient.
            What things are supposed to be
16
      supplied or stocked in the emergency
17
18
      cart?
            Items to take vital signs, a
19
      Α.
      glucometer, Glucomin or glucose for
20
21
      diabetics who have low blood sugar.
2.2
      Syringes, IV paraphernalia ---.
            Well, what about Ativan?
23
            Ativan is kept refrigerated, so
24
      it's brought separately.
25
```

```
66
            What happened after you
1
      assisted with taking the vitals?
2
           Mr. Smart became aggressive and
3
      combative.
4
         Do you believe that was part of
5
      Q.
6
      the seizure?
7
      Α.
            No.
            Do you believe that he became
8
      aggressive and combative after the
9
10
      seizure?
        Yeah, starting the postictal
11
12
     period.
           What happened after he became
13
      0.
      aggressive and combative?
14
15
         An order was obtained for the
      second dose to provide him Ativan.
16
17
            When was the first dose given?
      0.
18
            During the seizure activity.
      Α.
19
            Well, tell me what else
      0.
     happened during the seizure activity,
20
     because the only thing that I know of
21
     is that he was placed in a recovery
22
     position and his vitals were obtained.
23
     A. I believe it was Alisia
24
     Hollingsworth who called the on-call
25
```

```
67
      practitioner and received an order for
1
      IM Ativan. That was given.
2
      glucometer was not present on the
3
      emergency cart, so glucagon, which is
4
      an IM injection also, was given.
5
      you're not diabetic, glucagon does
6
      nothing to you.
7
            If you are diabetic and your
8
      blood sugar is low, glucagon will
9
      raise it. So a decision was made that
10
      since it wouldn't hurt him if he
11
      weren't diabetic to go ahead and give
12
13
      him the glucagon.
            Well, why wasn't the glucometer
14
      Q.
15
      on the emergency cart?
            I don't know why it wasn't.
16
      Α.
17
            But it should've been on the
      0.
      emergency cart; right?
18
      Α.
            Yes.
19
             So after he became combative,
20
      second dose of Ativan was ordered?
21
22
      Α.
            Yes.
            And was it administered?
23
      0.
24
      Α.
            Yes.
            And then what happened after
25
      Q..
```

```
68
      that?
1
            Mr. Smart continued to be
2
      Α.
      aggressive and combative. He had
3
      actually bit one of the COs. The CO
4
     was removed from the cell immediately
5
      to seek medical attention. 911 had
6
7
     been called, and there was no order
      obtained to call 911 for transport to
8
      an outside facility.
9
            Once Mr. Smart --- at the same
10
     time the order for the second dose of
11
     Ativan was obtained, the practitioner
12
     also stated, call 911. Get him
13
14
     transferred to an outside facility.
15
     So the IM Ativan was given, and the
16
     call to 911 would've been made at
17
     roughly the same point in time.
18
        You didn't mention anything
     about him being restrained or
19
     handcuffed. Was he restrained or
20
     handcuffed?
2.1
            Not at that point in time.
22
     Α.
            Was that ---?
23
     0.
            I mean, there were correctional
24
     officers maintaining control of his
25
```

```
69
      limbs, but he wasn't restrained for an
1
      extended period of time.
2
            When, if at all, was he
3
      retrained by handcuffs or foot
4
      shackles?
5
          Once the phone call had been
6
7
      made for 911 to come. And Mr. Smart
      was still aggressive and combative.
8
      He was handcuffed in preparation of
9
      transport by 911.
10
      Q. . At some point after 911 was
11
12
      called, he stopped breathing,
      according to the records. Do you
13
14
      recall that?
15
      Α.
            Yes.
16
      0.
            How long after he was
      handcuffed or had the foot shackles on
17
18
      did he stop breathing?
                    ATTORNEY KENYON:
19
                    Objection.
20
                    ATTORNEY DACHILLE:
21
                    Same objection.
22
            I can't recall.
23
      Α.
24
      BY ATTORNEY KILLION:
            Was he, in fact, still shackled
25
```

```
70
      when he stopped breathing?
 1
 2
            Yes.
      Α.
            How long, from the time that
 3
      0.
      you responded to the emergency went by
 4
 5
      before 911 was called?
 6
          I can't recall the times I
7
      wrote.
            Well, according to the records
8
      Q.
      and the investigation, I have that the
9
10
      event --- the seizure event occurred
      around 9:54 p.m. on the 4th, and 911
11
      was called around 11:30 that night.
12
13
                    ATTORNEY KENYON:
                    Objection. I think that
14
15
            is misstating the record.
                    ATTORNEY DACHILLE:
16
                    Same objection.
17
      BY ATTORNEY KILLION:
18
            Do you think it was more than
19
      an hour that passed until 911 was
20
21
     called?
2.2
        No.
      Α.
23
                    ATTORNEY DACHILLE:
24
                    He passed away at 11:30.
25
     BY ATTORNEY KILLION:
```

```
71
            What happened after he stopped
 1
 2
      breathing?
                    ATTORNEY DACHILLE:
 3
                    Objection to the form.
 4
 5
      BY ATTORNEY KILLION:
            What happened after Mr. Smart
 6
      0.
7
      stopped breathing?
            I had him placed on his back,
8
      checked for a pulse, took AED and
9
      began CPR and resuscitative efforts.
10
            Was he still handcuffed and
11
      shackled when you began resuscitation
12
13
      efforts?
         He was un-handcuffed and
14
15
      unshackled as that process was going
      on. I was checking for a pulse while
16
      he was still handcuffed, and the AED
17
      pads were placed as Corrections was
18
      working on removing the restraints.
19
            At the point in time when he
20
21
      was combative and was being
      restrained, what position was he in on
2.2
23
      the floor?
24
            He was laying on his stomach.
      Α.
            And how many officers were
25
      0.
```

```
72
      restraining him?
1
                    ATTORNEY DACHILLE:
2
                    Objection to the form.
3
4
      Α.
            I believe ---.
5
      BY ATTORNEY KILLION:
6
            And if it is varies at
7
      different time frames you can tell me
      that, as well.
8
        I mean, it did, but I would say
9
      roughly four individuals, one on each
10
      limb. Mr. Smart was very strong.
11
      O. How long did this combative
12
      phase last where he was being
1.3
      restrained by the corrections
14
      officers?
15
                    ATTORNEY DACHILLE:
16
                    Objection to form.
17
     A. I honestly couldn't tell you.
18
     Like I said, I dive right in an
19
2.0
     emergency situation.
21
     BY ATTORNEY KILLION:
            Sure. One of the things in
22
     your statement on the first page
23
     indicates that --- you said paramedics
24
     were called and commented that it took
25
```

```
124
            Did you have any Allegheny
1
      County corrections officers interfere
2
      with your efforts to respond to the
3
 4
      Frank Smart emergency?
            No, not that I can recall.
5
      Α.
            I think your testimony earlier,
6
      0.
7
      at least in part, was that in a
      postictal stage, medical patients are
8
      typically calm?
9
            Typically, although some had
10
      aggressive, combative reactions also.
11
      I don't want to say common, but that's
12
      one of the reactions that individuals
13
      have. Sometimes people become just
14
15
      --- I don't want to say inconsolable,
      because that sounds like you're
16
      speaking about a child. But they'll
17
      cry or they'll laugh for no reason.
18
      mean, those are things that can
19
20
      happen.
            And sometimes they become
21
      combative; is that correct?
2.2
            Yes.
23
      Α.
24
            Does it appear to you that Mr.
      Smart was becoming combative because
25
```

```
125
      he was in a postictal state?
1
      Α.
             Yes.
2
             When you observed Mr. Smart,
3
      that was in line with a postictal
4
      phase; is that fair to say?
5
6
      Α.
             Yes.
            And we've been using --- or
7
      maybe I have the term combative, what
8
      did you see Mr. Smart doing during
9
      this period in which he was combative?
10
             He was thrashing, attempting to
11
12
      hit
         individuals.
             Was he flailing his arms?
13
      0.
             Yes, sort of.
14
      Α.
15
             Was ---?
      0.
             His shirt was coming off.
16
      Α.
             Was he being attended at all?
17
      Q.
             Yes.
18
      Α.
             Is it fair to say that the
19
      0.
      people who are combative during
20
      postictal phase can injure themselves?
2.1
             As well as others, yes.
22
             Did it appear to you that Mr.
23
      Smart could have injured himself if he
24
      had not been secured by corrections
25
```

```
126
      officers?
1
            Yes, that is a possibility.
2
            One possibility is that he
3
      0.
      could smack his head on the floor?
4
5
      Α.
            Yes.
6
      0.
            You have a building made out of
7
      concrete?
             They are.
8
      Α.
            Can you give us just a ---
9
      roughly about how big the jail cell
10
      --- well, Mr. Smart's jail cell was?
11
            Maybe six feet by eight feet.
12
      Α.
            Some of that space is also
13
      0.
      taken up by the bunk beds, isn't it?
14
        As well as a table and a
15
      Α.
      toilet.
16
            So right, a toilet?
17
      Q.
            Right.
18
      Α.
            You were in the medical
19
      0.
20
      emergency room as far as a delay
      in ---?
21
            No, I had been providing care
22
      Α.
      to another inmate, which is why Ms.
23
      Hollingsworth went first. But I had
24
      arrived very, very shortly after her.
25
```